Case 19-17137-SLM Doc 1 Filed 04/08/19 Entered 04/08/19 18:49:17 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Justin First name Daniel Middle name Miller	First name Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9965	

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Case number (if known)

Debtor 1 Justin Daniel Miller

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 300 PROSPECT AVENUE, 6g hackensack, NJ 07601 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Bergen County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Document Page 3 of 55

Case number (if known) Debtor 1 **Justin Daniel Miller** Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business

partner, or by an affiliate?

Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Justin Daniel Miller

Document Page 4 of 55

Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprieto	r			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busin	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	& ZIP Code			
	it to this petition.		Check	the appropriate box	to describe your business:			
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as def	ined in 11 U.S.C. § 101(53A))			
				Commodity Broker ((as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-fl .C. 1116(dicate that you are a sow statement, and fed 1)(B).	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am f	ling under Chapter 11	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Anv	Hazardo	us Property or Any	Property That Needs Immediate Attention			
	Do you own or have any			,				
14.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code			

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Debtor 1 Justin Daniel Miller

Justin Daniei Willer

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 55 Debtor 1 **Justin Daniel Miller**

Desc Main

Case number (if known)

Par	Answer These Questi	0113 101 10	eporting r diposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a pe			fined in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			□ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you	owe that are not consu	mer debts or busine	ess debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7, are paid that funds will be a			perty is excluded and administrative expenses ?				
	administrative expenses are paid that funds will		■ No							
	be available for distribution to unsecured creditors?		Yes							
18.	How many Creditors do	1 -49		1 ,000-5,000)	1 25,001-50,000				
	you estimate that you owe?	□ 50-99		☐ 5001-10,00		☐ 50,001-100,000				
		☐ 100-1 ☐ 200-9		☐ 10,001-25,0	000	☐ More than100,000				
19.	How much do you	\$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,00		□ \$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you	\$0 - \$	50,000	□ \$1,000,001		☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		001 - \$100,000		1 - \$50 million	\$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
Par	t7: Sign Below									
For	you	I have ex	camined this petition, and I de	eclare under penalty of	perjury that the infor	mation provided is true and correct.				
			•	· · · · · · · · · · · · · · · · · · ·	, ,	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.				
			rney represents me and I did nt, I have obtained and read			ot an attorney to help me fill out this				
		I request	relief in accordance with the	e chapter of title 11, Unit	ed States Code, spe	ecified in this petition.				
		bankrupt and 3571	cy case can result in fines up	nt, concealing property, p to \$250,000, or imprise	or obtaining money onment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		Justin I	Daniel Miller e of Debtor 1		Signature of Debto	or 2				
		Executed	d on April 8, 2019		Executed on					
			MM / DD / YYYY		MN	M / DD / YYYY				

Debtor 1 Justin Daniel Miller

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David Edelberg	Date	April 8, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
David Edelberg		
Printed name		
Cullen and Dykman LLP		
Firm name		
433 Hackensack Avenue, 12th Fl.		
Hackensack, NJ 07601		
Number, Street, City, State & ZIP Code		
Contact phone 201-488-1300	Email address	dedelberg@cullenanddykman.com
022381983 NJ		
Bar number & State		_

Document Page 8 of 55 Fill in this information to identify your case: Debtor 1 **Justin Daniel Miller** First Name Middle Name Last Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name DISTRICT OF NEW JERSEY United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value of	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	2,700.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,632.84
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,332.84
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	45,100.69
	Your total liabilities	\$	45,100.69
Par	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,883.07
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,837.79
Par	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Justin Daniel Miller

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,607.06

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	25,112.64
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,112.64

				Doc	ument	Page 10 of 55					4/08/19 6:45PN
Fill i	n this information to	identify your	case and thi	s filing	:						
Debt	or 1 Justir	n Daniel Mil	ler								
	First Nam		Middle	Name		Last Name		_			
Debt											
(Spou	se, if filing) First Nan	ne	Middle	Name		Last Name					
Unite	ed States Bankruptcy C	Court for the:	DISTRICT C	OF NEV	V JERSEY						
Case	number									_	Objects to the factor and
Cast											Check if this is an amended filing
											g
~		0 A /D									
Off	<u>icial Form 10</u>	6A/B									
Sc	hedule A/E	3: Prop	ertv								12/15
				n asset	only once. It	f an asset fits in more than	one cate	gory, list th	he asset in t	he c	ategory where you
hink nforn	t fits best. Be as compl	ete and accura	ate as possible	. If two	married peop	ble are filing together, both the top of any additional pa	n are equa	lly respons	sible for sup	plyi	ng correct
Part	: Describe Each Resid	dence. Buildin	g. Land. or Oth	er Real	Estate You C	Own or Have an Interest In					
		<u> </u>	<u></u>								
. Do	you own or have any le	gal or equitabl	le interest in ar	ny resid	ence, buildin	g, land, or similar property	/?				
	No. Go to Part 2.										
	Yes. Where is the proper	tv?									
		-, .									
1.1				What	is the proper	rty? Check all that apply					
	Canaveral Groves			_		,					
	Subd Per Sb 2 Pg	63 Tract 19			Single-family						or exemptions. Put
	Blck 10 & 1/2 of Ac					ulti-unit building					ms on Schedule D: ecured by Property.
	Pg				Condominiu	m or cooperative					
	Street address, if available, or	r other description	1								
					Manufacture	ed or mobile home	C.,	rrent value	of the	٠	rrant value of the
		FL			Land			tire propert			rrent value of the rtion you own?
-	City	State	ZIP Code		Investment p	property		\$2,	700.00		\$2,700.00
					Timeshare		De	scribe the	nature of vo	ur o	wnership interest
					Other		(su	ich as fee s	simple, tena		by the entireties, or
				Who		st in the property? Check or	_	fe estate),	if known.		
				_	Debtor 1 onl	•	- 01	wner			
	Country				Debtor 2 onl	-					
	County					d Debtor 2 only	п		this is comn	nun	ity property
						of the debtors and another		(see instruc	,		
						you wish to add about this tion number:	s item, su	ch as local			
					=						
					er: swamp	tion: E1/2 of NE 1/4 o	of SW 1/	4 S 17 T	24 R 35		
				9							
						from Part 1, including					\$2,700.00
ķ	ages you have attach	hed for Part	1. Write that r	numbe	r here			=>	·		\$2,700.00
Part :	2: Describe Your Vehic	eles									
						, whether they are regis Executory Contracts and				nicle	es you own that
JULIE	one else unves. Il you	icase a verill	io, aiso iepoli	in on S	onedule G.	Executory Contracts and	onexpire	ou Leases	•		
3. C a	ırs, vans, trucks, trac	tors, sport u	tility vehicles	, moto	rcycles						
_											
	No										

☐ Yes

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Case number (if known) Document **Justin Daniel Miller** Debtor 1 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$500.00 Household: bookshelves, night tables, dressers, lamps, bed 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Electronics: Laptop, xbox, headphones, game controlers, tv \$350.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... Collectibles: \$50.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes

□ No

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

Yes. Describe.....

\$350.00 Clothes:

Jewelrv

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

☐ Yes. Describe.....

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Debtor '	Justin Daniel Miller	Document	r age 12 or c	Case number (if known)	
-	-farm animals				
Exa ■ No	amples: Dogs, cats, birds, horses				
	es. Describe				
_ `	other personal and household items	you did not already list, i	ncluding any healtl	h aids you did not list	
■ No					
□ 1¢	es. Give specific information				
	d the dollar value of all of your entrie Part 3. Write that number here	· · · · · · · · · · · · · · · · · · ·		es you have attached	\$1,250.00
Port 4	Describe Vour Eineneiel Accete				
	Describe Your Financial Assets own or have any legal or equitable in	nterest in any of the follow	vina?		Current value of the
	our or mane any regar or equinante in	,	9.		portion you own?
					Do not deduct secured claims or exemptions.
					ciains of exemptions.
16. Cas	h amples: Money you have in your wallet, i	in vour home in a safe den	osit how and on han	d when you file your petitic	nn
		iri yodi riome, iri a sale dep	osit box, and on han	ia when you life your penno	лт -
■ Ye	98				
				Cash	\$50.00
	osits of money amples: Checking, savings, or other final			credit unions, brokerage h	ouses, and other similar
	institutions. If you have multiple	accounts with the same ins	stitution, list each.		
	es	Institution	name:		
	17.1.	Checking	g Account: TD Ba	nk	\$0.00
-					
		Savingo	Account: TD Bon	.le	¢0.00
	17.2.	Savings	Account: TD Ban	ik	\$0.00
	ds, mutual funds, or publicly traded samples: Bond funds, investment account		nov market accounts	、	
■ No	•	is with brokerage illins, mo	ley market accounts	•	
_		or issuer name:			
	-publicly traded stock and interests in t venture	n incorporated and uninc	orporated business	ses, including an interest	in an LLC, partnership, and
■ No					
	es. Give specific information about them	١			
	Name of entity			% of ownership:	
20. Gov	ernment and corporate bonds and ot	her negotiable and non-n	egotiable instrume	nts	
Neg	gotiable instruments include personal ch	ecks, cashiers' checks, pro	missory notes, and r	money orders.	
_	n-negotiable instruments are those you o	cannot transfer to someone	by signing or deliver	ring them.	
■ No					
⊔ Y€	es. Give specific information about them Issuer name:				
	issuei name.				
	rement or pension accounts	404/b) 409/b) thatta	no occupita an alle a	enancian or needle electrica	alana
Exa	amples: Interests in IRA, ERISA, Keogh,	401(K), 403(D), thrift saving	js accounts, or other	pension or profit-sharing p	วเลทร
	es. List each account separately.				
- 16	Type of account:	Institution	name:		

page 3

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Justin Daniel Miller

Debtor 1

		Retirement: Fidelity 401k		\$1,032.84
22		repayments deposits you have made so that you may continue service or use from with landlords, prepaid rent, public utilities (electric, gas, water), teleco		or others
	☐ Yes	Institution name or individual:		
23		a periodic payment of money to you, either for life or for a number of	years)	
	■ No □ Yes Issu	uer name and description.		
24	26 U.S.C. §§ 530(b)(1), 52	IRA, in an account in a qualified ABLE program, or under a qual 29A(b), and 529(b)(1).	lified state tuition progran	n.
	■ No □ Yes Insti	itution name and description. Separately file the records of any intere	sts.11 U.S.C. § 521(c):	
25	. Trusts, equitable or future ■ No □ Yes. Give specific inform	re interests in property (other than anything listed in line 1), and	rights or powers exercisa	able for your benefit
26		demarks, trade secrets, and other intellectual property in names, websites, proceeds from royalties and licensing agreement	ts	
	☐ Yes. Give specific inform	mation about them		
27	Examples: Building permi	nd other general intangibles its, exclusive licenses, cooperative association holdings, liquor licens	es, professional licenses	
	■ No□ Yes. Give specific information	mation about them		
M	loney or property owed to	you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax refunds owed to you ☐ No ■ Yes. Give specific inform	u mation about them, including whether you already filed the returns an	d the tax years	
		2018 Tax Refund	Federal Income Tax Return and State Taxes	\$1,300.00
29	. Family support Examples: Past due or lui No ☐ Yes. Give specific inform	mp sum alimony, spousal support, child support, maintenance, divord	ce settlement, property settle	ement
30		e owes you s, disability insurance payments, disability benefits, sick pay, vacation aid loans you made to someone else	pay, workers' compensation	on, Social Security
	■ No □ Yes. Give specific inform	mation		
31	Interests in insurance po		er's or renter's insurance	
	■ No		or 3, or remer a maurance	
	☐ Yes. Name the insurance	ce company of each policy and list its value. Company name: Beneficiar	y:	Surrender or refund
Of	ficial Form 106A/B	Schedule A/B: Property		page 4

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Case number (if known) Document Debtor 1 **Justin Daniel Miller**

	value:
 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recommend someone has died. ■ No □ Yes. Give specific information 	eive property because
 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim 	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to ■ No □ Yes. Describe each claim	o set off claims
35. Any financial assets you did not already list ■ No □ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$2,382.84
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?	
■ No. Go to Part 6. □ Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7. □ Yes. Go to line 47. 	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No □ Yes Give specific information	

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Justin Daniel Miller

Deb	tor 1 Justin Daniel Miller	Document	Paye 15 01	Case number (if known)	
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$2,700.00
56.	Part 2: Total vehicles, line 5	_	\$0.00		
57.	Part 3: Total personal and household items, I	ine 15	\$1,250.00		
58.	Part 4: Total financial assets, line 36		\$2,382.84		
59.	Part 5: Total business-related property, line 4	5	\$0.00		
60.	Part 6: Total farm- and fishing-related proper	ty, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ _	\$0.00		
62.	Total personal property. Add lines 56 through 0	61	\$3,632.84	Copy personal property total	\$3,632.84
63.	Total of all property on Schedule A/B. Add line	e 55 + line 62			\$6,332.84

Official Form 106A/B Schedule A/B: Property page 6

				Document	F	Page 16 of 55	4/08/19 6:45PN
Fil	I in this inform	ation to identify your o	case:				
De	ebtor 1	Justin Daniel Mille					
Do	ebtor 2	First Name	Middle	Name	L	ast Name	
	ouse if, filing)	First Name	Middle	Name	L	ast Name	
Un	nited States Ban	kruptcy Court for the:	DISTRICT	OF NEW JERSE	Υ		
	ase number			_			☐ Check if this is an amended filing
)	fficial For	m 106C					
S	chedule	C: The Pro	perty	You Cla	im	as Exempt	4/19
ne iee as	property you liseded, fill out and the number (if known the number)	ted on <i>Schedule A/B: P</i> attach to this page as rown).	Property (Offi many copies	cial Form 106A/B) of <i>Part 2: Addition</i>	as yo nal Pa	ur source, list the property that you ge as necessary. On the top of any	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
ny un xe o t	ecific dollar am applicable stands—may be urention to a pa che applicable s	ount as exempt. Altern tutory limit. Some exe limited in dollar amou rticular dollar amount statutory amount.	natively, your matively, your methods. Int. However and the value.	u may claim the f such as those for er, if you claim an lue of the proper	ull fai healt exen	r market value of the property be h aids, rights to receive certain b option of 100% of fair market valu	ing exempted up to the amount of penefits, and tax-exempt retirement
Pa	rt 1: Identify	the Property You Cla	im as Exem	ıpt			
1.	Which set of	exemptions are you cl	aiming? Ch	eck one only, eve	n if yo	ur spouse is filing with you.	
	☐ You are cla	iming state and federal	nonbankrup	tcy exemptions.	11 U.S	i.C. § 522(b)(3)	
	You are cla	iming federal exemptior	ns. 11 U.S.0	C. § 522(b)(2)			
2.	For any prope	erty you list on Schedu	ule A/B that	you claim as exe	empt,	fill in the information below.	
		n of the property and line nat lists this property		rrent value of the	Amo	ount of the exemption you claim	Specific laws that allow exemption
				py the value from hedule A/B	Che	ck only one box for each exemption.	
		roves Subd Per Sb Blck 10 & 1/2 of Adj		\$2,700.00		\$2,700.00	11 U.S.C. § 522(d)(1)
	Per Orb 164 Other: swan	6 Pg FL np land iption: E1/2 of NE 1/ T 24 R 35				100% of fair market value, up to any applicable statutory limit	
		bookshelves, night sers, lamps, bed		\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line from Scho					100% of fair market value, up to any applicable statutory limit	
		Laptop, xbox,	tv —	\$350.00		\$350.00	11 U.S.C. § 522(d)(3)
	Line from Scho					100% of fair market value, up to any applicable statutory limit	
	Collectibles Line from Scho			\$50.00		\$50.00	11 U.S.C. § 522(d)(3)

☐ 100% of fair market value, up to any applicable statutory limit

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Case number (if known)

De	btor 1	Jus	stin Daniel Miller	Document		Case number (if known)	
			ription of the property and line on 4/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
				Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		thes:	Schedule A/B: 11.1	\$350.00		\$350.00	11 U.S.C. § 522(d)(3)
	LINE	HOIH	Scriedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
	Cas		Schedule A/B: 16.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
	LINE	HOIH	Scriedule A/B. 19.1			100% of fair market value, up to any applicable statutory limit	
			g Account: TD Bank Schedule A/B: 17.1	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
	LIIIC	HOIH	Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
			Account: TD Bank Schedule A/B: 17.2	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
	LINE	IIOIII	Scriedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
			ent: Fidelity 401k Schedule A/B: 21.1	\$1,032.84		\$1,032.84	11 U.S.C. § 522(d)(5)
	LIIIO	nom	Octional Arb. 2111			100% of fair market value, up to any applicable statutory limit	
			Income Tax Return and State	\$1,300.00		\$1,300.00	11 U.S.C. § 522(d)(5)
			Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
3.			elaiming a homestead exemption of adjustment on 4/01/22 and every			led on or after the date of adjustmen	t.)
		No					
		Yes.	Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case?	•
			No				
			Yes				

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Fill in this infor	mation to identify your	case:		
Debtor 1	Justin Daniel Mill	ler		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				Check if this is an

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Case.	19-1/13/-SLIVI	DOCI	Pileu 04/00 Document	8/19 End Page 19	ereu 04/08/19 1/ 9 of 55	0.49.17	4/08/19 6:45PM
Fill in	this inform	ation to identify your						
Debto	or 1	Justin Daniel Mille	۵r					
Dobto		First Name	Middle Na	ame	Last Name			
Debto (Spouse	or 2 e if, filing)	First Name	Middle Na	ame	Last Name			
United	d States Ban	kruptcy Court for the:	DISTRICT	F NEW JERSE	(_		
Case (if know	number			_				Check if this is an amended filing
	cial Form edule E/	106E/F F: Creditors W	ho Have	Unsecure	d Claims			12/15
any exe Schedu Schedu left. Att	ecutory contra ule G: Executo ule D: Creditor tach the Conti	acts or unexpired leases bry Contracts and Unexp rs Who Have Claims Sec	that could resuired Leases (Of ured by Proper	ilt in a claim. Also ficial Form 106G). ty. If more space i	o list executory of . Do not include s needed, copy t	contracts on Schedule A/E any creditors with partiall	B: Property (Offi ly secured claim ut, number the e	s that are listed in ntries in the boxes on the
Part 1	List All	of Your PRIORITY Un	secured Clair	ns				
1. Do	o any creditor	s have priority unsecure	d claims agains	st you?				
	No. Go to Pa	rt 2.						
	Yes.							
Part 2	List All	of Your NONPRIORIT	Y Unsecured	Claims				
3. Do	o any creditor	s have nonpriority unsec	ured claims ag	ainst you?				
	No. You have	e nothing to report in this pa	art. Submit this f	orm to the court wi	th your other sche	edules.		
	Yes.							
4. Lis	st all of your r	, list the creditor separately	for each claim.	For each claim list	ed, identify what t	holds each claim. If a cre ype of claim it is. Do not list three nonpriority unsecured	claims already in	ncluded in Part 1. If more
								Total claim
4.1		n Education Service Creditor's Name	es	Last 4 digits of a	ccount number	9233		\$540.16
	P.O. Box			When was the de	bt incurred?			_
	Number Str	eet City State Zip Code ed the debt? Check one.		As of the date yo	u file, the claim i	is: Check all that apply		
	Debtor 1			☐ Contingent				
	Debtor 2	•		Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
	☐ At least	one of the debtors and and	other	Type of NONPRIC	ORITY unsecured	d claim:		
		this claim is for a comr	nunity	Student loans				
	debt Is the claim	subject to offset?		Obligations aris		ration agreement or divorce	e that you did not	
	■ No			☐ Debts to pension	on or profit-sharin	g plans, and other similar d	ebts	
	☐ Yes			☐ Other. Specify				_
					Student Lo	ans		_

Page 20 of 55 Case number (if known) Document Debtor 1 Justin Daniel Miller 4.2 \$75.93 AmeriHealth New Jersey PPO Last 4 digits of account number 8339 Nonpriority Creditor's Name 259 Prospect Plains Rd When was the debt incurred? Cranbury, NJ 08512 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Medical Expense ☐ Yes 4.3 **Fairleigh Dickinson University** Last 4 digits of account number **PR11** \$8,086.88 Nonpriority Creditor's Name 1000 River Rd When was the debt incurred? Teaneck, NJ 07666 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify tuition 4.4 **Ford Motor Credit** Last 4 digits of account number \$8.527.96 Nonpriority Creditor's Name P.O. Box 390910 When was the debt incurred? Minneapolis, MN 55439 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection ☐ Yes ■ Other. Specify Case DC-31062-11

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Case number (if known)

Great Lakes	Last 4 digits of account number	6684	\$16,485.60
Nonpriority Creditor's Name P.O.Box 7860 Madison, WI 53707-7860	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify		
	Student Lo	vans	
Hackensack University Medical			
Center	Last 4 digits of account number	0449	\$1,600.00
Nonpriority Creditor's Name P.O. Box 48027	When was the debt incurred?	01/30/2016	
Newark, NJ 07101 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	Student loans	u Claim.	
☐ Check if this claim is for a community debt s the claim subject to offset?		aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other. Specify Severe Cor		
Hackensack University Medical			
Center	Last 4 digits of account number	3530	\$569.57
Nonpriority Creditor's Name P.O. Box 48027	When was the debt incurred?	04/3/2017	
Newark, NJ 07101 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:	
☐ Check if this claim is for a community debt		protion agreement or diverse that we did and	
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify		

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Case number (if known)

Debtor	Justin Daniel Miller		Case number (if known)	
4.8	Hackensack University Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	2980	\$3,825.36
	P.O. Box 48027	When was the debt incurred?	10/18/2017	
	Newark, NJ 07101 Number Street City State Zip Code	As of the date you file, the claim	is. Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing	ig plans, and other similar debts	
	Yes	Other. Specify		
	Hackensack University Medical			
4.9	Center	Last 4 digits of account number	4254	\$110.34
	Nonpriority Creditor's Name P.O. Box 48027 Newark, NJ 07101	When was the debt incurred?	04/3/2017	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	·		
		- Other. Specify		
4.1	Hackensack University Medical		0000	\$4.000 F7
0	Center Nonpriority Creditor's Name	Last 4 digits of account number	9638	\$1,683.57
	P.O. Box 48027	When was the debt incurred?	09/14/2017	
	Newark, NJ 07101			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		

Hackensack University Medical Center	Last 4 digits of account number 9425	\$20
Nonpriority Creditor's Name P.O. Box 48027	When was the debt incurred? 09/15/2017	
Newark, NJ 07101 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only	Пол	
Debtor 1 only Debtor 2 only	☐ Contingent	
_ ′	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce report as priority claims	e that you did not
■ No	☐ Debts to pension or profit-sharing plans, and other similar of	debts
Yes	Other. Specify	
HMC Cardiac Diagnostic Service	Last 4 digits of account number 6189	\$2
Nonpriority Creditor's Name	Last 4 digits of account number 6189	ΨΖ.
30 Prospect Ave	When was the debt incurred?	
Hackensack, NJ 07601 Number Street City State Zip Code	As of the date you file the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce	e that you did not
Is the claim subject to offset?	report as priority claims	,
No	\square Debts to pension or profit-sharing plans, and other similar α	debts
Yes	Other. Specify	
Neurologic Specialties, LLC	Last 4 digits of account number	\$6
Nonpriority Creditor's Name 211 Essex Street	When was the debt incurred?	
Suite 205 Hackensack, NJ 07601		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce	a that you did not

■ No

☐ Yes

Other. Specify DC-017410-18

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Page 24 of 55 Case number (if known) Document Debtor 1 Justin Daniel Miller 4.1 **Progressive Insurance Company** 0603 \$990.82 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2 Wells Ave Newton, MA 02459 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Riverside Pediatric Group** 8277 \$570.00 Last 4 digits of account number Nonpriority Creditor's Name 38 Meadowlands Pkwy When was the debt incurred? Suite 205 Secaucus, NJ 07094 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Valley Physicians Services PC \$65.62 Last 4 digits of account number 6 Nonpriority Creditor's Name P.o. Box 19000 When was the debt incurred? Bellfast, ME 04915 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No ☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

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4.1 Ver	izon Wireless	Last 4 digits of account numb	er 0001	\$904.47
Non	priority Creditor's Name e Verizon way	When was the debt incurred?	·	
Bas Num	sking Ridge, NJ 07920 her Street City State Zip Code pincurred the debt? Check one.	As of the date you file, the clai	m is: Check all that apply	
■ [Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecu	ıred claim:	
	Check if this claim is for a community	☐ Student loans		
debt	•	Obligations arising out of a sereport as priority claims	eparation agreement or divorce that you did not	
	- No	Debts to pension or profit-sha	aring plans, and other similar debts	
	es	Other. Specify		
Part 3: L	ist Others to Be Notified About a De	ebt That You Already Listed		
is trying to have more	collect from you for a debt you owe to s	omeone else, list the original credito at you listed in Parts 1 or 2, list the a	at you already listed in Parts 1 or 2. For examp r in Parts 1 or 2, then list the collection agency dditional creditors here. If you do not have add	here. Similarly, if you
Name and Ad		On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
AES/Paid		Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	
PO BOX 2	251 g, PA 17105-2251		Part 2: Creditors with Nonpriority Unsecured	Claims
Tiarrisbur	g, 1 A 17 100-2201	Last 4 digits of account number	9233	
Name and Ad	ldress count Services	On which entry in Part 1 or Part 2 did y Line 4.3 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Clai	me
422 Bedfo		<u></u> e. (e. e. e	Part 2: Creditors with Nonpriority Unsecured	
Bellmore,	NY 11710-3584	Last 4 digits of account number	PR11	Ciaiiis
Name and Ad	Idress	On which entry in Part 1 or Part 2 did y	you list the original creditor?	
Arstrat		Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms
	re Parkway		■ Part 2: Creditors with Nonpriority Unsecured	Claims
Suite 1100 Houston,				
riouston,	17.77030	Last 4 digits of account number		
Name and Ad		On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
	o, Stadtmauer and	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms
Walentow Northview Suite B208 Clifton, N.	Office Park 1035 RT46E 8		■ Part 2: Creditors with Nonpriority Unsecured	Claims
Omton, No		Last 4 digits of account number		
Name and Ad	ldress o, Stadtmauer and	On which entry in Part 1 or Part 2 did y Line 4.7 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Clai	me
Walentow	icz LL Office Park 1035 RT46E	Line or (orient one).	■ Part 2: Creditors with Nonpriority Unsecured	
Clifton, N.		Last 4 digits of account number		
Name and Ad	ldross	On which ontry in Bort 1 or Bort 2 did :	you list the original creditor?	
	cress Credit and Collection	On which entry in Part 1 or Part 2 did y Line 4.8 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Clai	ms
Bureau			Part 2: Creditors with Nonpriority Unsecured	
P.O. Box 1				
vvnitenous	se Station, NJ 08889	Last 4 digits of account number		
Name and Ad	ldress	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	

Official Form 106 E/F

Debtor 1 Justin Daniel Miller

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Total Claim

45,100.69

Debtor 1 Jus	tin Da	niel Miller	age 27 C	oe nu	り mber (if known)		
	6f.	Student loans	6	f.	\$	25,112.64	
Total claims							
from Part 2	6g.	Obligations arising out of a separation agreement or divorgou did not report as priority claims		g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other simila	r debts 6	h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that a here.	amount 6	i.	\$	19,988.05	

Total Nonpriority. Add lines 6f through 6i.

		1700.000	FAUE ZO ULJJ
Fill in this info	rmation to identify your	case:	
Debtor 1	Justin Daniel Mill	ler	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

		Name, Number	, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

		Documei	<u>nt Pade 29 of :</u>	<u>hb</u>
Fill in this info	rmation to identify your o	ase:		
Debtor 1	Justin Daniel Mille	ar .		
200101	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106H			
	H: Your Code	ebtors		12/15
Jonodan	7 TI. TOUL OOU			12/10
ill it out, and no our name and		boxes on the left. Attach Answer every question.	the Additional Page to t	n. If more space is needed, copy the Additional Page, his page. On the top of any Additional Pages, write a codebtor.
	ne last 8 years, have you alifornia, Idaho, Louisiana,			(Community property states and territories include ton, and Wisconsin.)
■ No. Go t	n line 3			
_	your spouse, former spou	se, or legal equivalent live	with you at the time?	
in line 2 ag	pain as a codebtor only if), Schedule E/F (Official	that person is a guarant	or or cosigner. Make sui	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official i). Use Schedule D, Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and ZIF	^o Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1 Phili	p Miller			☐ Schedule D, line
	edgewood Road			■ Schedule E/F, line 4.4
How	ell, NJ 07731			☐ Schedule G

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	in this information to identify your countries to a Justin Danie								
_	btor 2								
	ited States Bankruptcy Court for the	: DISTRICT OF NEW J	JERSEY						
	se number		-			ck if this is An amende	ed filing	g postpetition	n chapter
\sim	#: a: a Farma 400							ollowing date:	
_	fficial Form 106l chedule I: Your Inc				1	MM / DD/ Y	YYYY		12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing w	ng jointly, and your spo ith you, do not include	ouse is informa	living with	n you, incl It your spo	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fil	ling spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	Seafood Team Me	mber					
	Include part-time, seasonal, or self-employed work.	Employer's name	Whole Foods MAr	ket					
	Occupation may include student or homemaker, if it applies.	Employer's address	300 Bergen Town Paramus, NJ 0765						
		How long employed t	here? 1 Years, 5	Month	าร	_			
Pai	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to repo	ort for an	ıy line, writ	e \$0 in the	space. Inc	alude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information fo	or all em	ployers for	that perso	on on the lir	nes below. If	you need
					For De	btor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,560.35	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3. +	-\$	47.30	+\$	N/A	-
1	Calculate gross Income Add liv	20 2 1 lino 2		4	¢ 26	07.65	•	NI/A	

Deb	otor 1	Justin Daniel Miller	-	C	ase r	number (if kno	wn)				
					For I	Debtor 1		-	Debtor		
	Cop	y line 4 here	4.		\$	2,607.	65	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	518.	33	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		<u> </u>		00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		<u> </u>	104.		\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$		00	\$		N/A	_
	5e.	Insurance	5e.		\$	101.	92	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.	00	\$		N/A	_
	5g.	Union dues	5g.		\$	0.	00	\$		N/A	_
	5h.	Other deductions. Specify:	5h.	.+	\$	0.	00	+ \$ _		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	724.	58	\$		N/A	<u>. </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,883.	07	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.	00	\$		N/A	
	8b.	Interest and dividends	8b.		<u> </u>		00	\$		N/A	_
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance	8c. 8d. 8e.		\$ \$ \$	0.	00 00 00	\$_ \$_ \$_		N/A N/A N/A	<u> </u>
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	01		Φ.			Φ.			
	9.4	Specify: Pension or retirement income	_ 8f.		\$		00	\$_ \$		N/A	_
	8g. 8h.	Other monthly income. Specify:	8g. 8h.		_{\$} —		00 00	· —		N/A N/A	_
	OII.	- The monthly moone. Openly.	_ 011.	·-	Ψ	U.		'Ψ_			_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.	00	\$_		N/A	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	1	,883.07	. s		N/A	= \$	1,883.07
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		<u> </u>		1,000.07	`_		14/7		1,000.01
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		,	•		•	Schedule	∍ J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							e. 12.	\$	1,883.07
			_						l	Combi month	ned ly income
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes Explain:	?								

Official Form 106l Schedule I: Your Income page 2

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	in this informat	ion to identify						
FIII	in this informat	tion to identify yo	our case:					
Deb	tor 1	Justin Danie	l Miller				t if this is:	
Deb	tor 2					_	An amended filing	ving postpetition chapter
	ouse, if filing)							the following date:
Linit	ad Statos Bankr	untov Court for the	· DISTRI	CT OF NEW JERSEY			/M / DD / YYYY	
Unit	ed States Bankii	upicy Court for the	. DISTRI	CT OF NEW JERSET		יו	AINI / DD / TTTT	
1	e number nown)							
(
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your I	Exper	ises				12/15
Be info	as complete a ormation. If me mber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta y question	If two married people ar ch another sheet to this				
Pari	t 1: Descri	ibe Your House	hold					
١.	_							
	■ No. Go to		in a conar	ate household?				
	□ res. Doe :		iii a sepai	ate nousenoiu:				
	=	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents i	names.						☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
3.	Do your exp	enses include	_					☐ Yes
0.	expenses of	people other the people in the people of the people in the	han ┌	No Yes				
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		assistance and		government assistance i luded it on <i>Schedule I:</i>)			Your expe	enses
•		•						
4.		r home owners d any rent for the		ses for your residence. In lot.	nclude first mortgage	4. \$		900.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
	•	ty, homeowner's	-			4b. \$		0.00
				ipkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loops	4d. \$ 5. \$		0.00 0.00
J.	Auditioliai II	iorigage payille	onto for yo	on residence, such as 110	me equity idalis	J. Þ		0.00

Debtor 1 Justi	n Daniel Miller	Case num	ber (if known)	
. Utilities:				
	icity, heat, natural gas	6a.	\$	0.00
	r, sewer, garbage collection	6b.		0.00
	hone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	. Specify:	6d.		0.00
	ousekeeping supplies	7.		500.00
	nd children's education costs	8.	\$	0.00
	undry, and dry cleaning	9.	\$	0.00
-	are products and services	10.	\$	
	d dental expenses			100.00
	•	11.	\$	0.00
•	tion. Include gas, maintenance, bus or train fare. de car payments.	12.	\$	100.00
	ent, clubs, recreation, newspapers, magazines, and books	13.	· ·	200.00
	contributions and religious donations	14.		0.00
5. Insurance.	contributions and rengious donations	14.	Ψ	0.00
	de insurance deducted from your pay or included in lines 4 or 20.			
15a. Life in		15a.	\$	0.00
15b. Health		15b.	·	0.00
15c. Vehicl		15c.		0.00
	insurance. Specify:	15d.	· -	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specify:		16.	\$	0.00
	or lease payments: ayments for Vehicle 1	17a.	¢	0.00
			\$	
	ayments for Vehicle 2	17b.	·	0.00
17c. Other.		17c.	·	0.00
17d. Other.	. ,	17d.	>	0.00
	ents of alimony, maintenance, and support that you did not repo rom your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10		\$	0.00
	ents you make to support others who do not live with you.	, oi).	\$	0.00
Specify:	ionio you make to capport ethore who are not me man your	19.		0.00
. ,	property expenses not included in lines 4 or 5 of this form or on		our Income	
	ages on other property	20a.		0.00
20b. Real e		20b.		37.79
	erty, homeowner's, or renter's insurance	20c.		0.00
•	enance, repair, and upkeep expenses	20d.		0.00
	eowner's association or condominium dues	20e.	·	0.00
			·	
. Other: Spec	· -	21.	+\$	0.00
•	our monthly expenses			
	es 4 through 21.		\$	1,837.79
22b. Copy lir	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	
22c. Add line	e 22a and 22b. The result is your monthly expenses.		\$	1,837.79
3. Calculate yo	our monthly net income.			
-	line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,883.07
	your monthly expenses from line 22c above.	23b.		1,837.79
	, ,	200.		1,001.113
	act your monthly expenses from your monthly income.	23c.	\$	45.28
The re	esult is your monthly net income.	۷۵۵.	Ψ	70120
For example,	ect an increase or decrease in your expenses within the year aft do you expect to finish paying for your car loan within the year or do you expect to the terms of your mortgage?			e or decrease because of a
■ No.				
— 110. П Yes	Explain here:			

Fill in this infor	rmation to identify your	case:			
Debtor 1	Justin Daniel Mille	er			
Dahtaro	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERS	SEY		
Case number (if known)					☐ Check if this is an amended filing
Official For		n Individual	Debtor's Sc	hedules	12/15
If two married p	eople are filing together	, both are equally respons	sible for supplying corr	ect information.	
obtaining mone years, or both. 1		connection with a bankr			nent, concealing property, or , or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare retrue and correct.	that I have read the summ	nary and schedules filed	d with this declaration	n and
X /s/ Jus	stin Daniel Miller		X		
Justin	Daniel Miller ure of Debtor 1		Signature of I	Debtor 2	
Date	April 8, 2019		Date		

Fill	l in this infor	mation to identify you	r case:			
	btor 1	Justin Daniel Mi				
		First Name	Middle Name	Last Name		
1 -	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
.						
Un	ited States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERS	SE Y		
1	se number _					Check if this is an amended filing
Of	ficial Fo	orm 107				
St	atement	of Financial	Affairs for Individ	duals Filing for E	Bankruptcy	4/1
info nun	ormation. If not	nore space is needed, n). Answer every que	ible. If two married people a attach a separate sheet to stion. arital Status and Where You	this form. On the top of an		
1.	What is you	ır current marital statı	ıs?			
•	_					
	☐ Married					
	■ Not ma	irried				
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. Li	st all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	V.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
	310 Prosp Apt 126 hackensa	pect Ave ack, NJ 07601	From-To: 1/2016 - 5/201 9	Same as Debtor	1	☐ Same as Debtor 1 From-To:
3. stat	■ No □ Yes. M	ries include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Net thedule H: Your Codebtors (Of Ir Income	vada, New Mexico, Puerto R		
	<u> </u>					
4.	Fill in the tot	al amount of income yo	nployment or from operating a received from all jobs and a have income that you received	all businesses, including part	-time activities.	lendar years?
	□ No					
	Yes. Fi	ll in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Debtor 1 Justin Daniel Miller

	Debtor 1		Debtor 2			
	Sources of income Check all that apply.			Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$24,536.76	☐ Wages, commissions, bonuses, tips			
	☐ Operating a business		☐ Operating a business			
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$9,228.00	☐ Wages, commissions, bonuses, tips			
	☐ Operating a business		☐ Operating a business			
For the calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$10,897.00	☐ Wages, commissions, bonuses, tips			
	☐ Operating a business		☐ Operating a business			
5. Did you receive any other incom Include income regardless of wheth and other public benefit payments; winnings If you are filing a joint care.	her that income is taxable. Exa pensions; rental income; inter	amples of <i>other income</i> are all rest; dividends; money collect	ed from lawsuits; royalties; an			

winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

	Debtor 1		Debtor 2			
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2018)	Federal Tax Return	\$1,452.00				
For the calendar year before that: (January 1 to December 31, 2017)	Federal Tax Return	\$1,714.00				
For the calendar year: (January 1 to December 31, 2016)	Federal Tax Return	\$1,096.00				

List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either Debtor	1's or Debtor	2's debts	primarily	/ consumer	debts?
u.	AIE EILIIEI DEDLOI	I S OI DEDIOI	Z 3 UCDIS	primarin	CONSUME	uento:

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No.

☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

ase number (if known) Debtor 1 **Justin Daniel Miller** Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Nature of the case Status of the case Case title Court or agency Case number Ford Motor Credit v Miller wage garnish **Superior Court of New** Pending DC 31062-11 Jersey ☐ On appeal 10 Main Street □ Concluded Hackensack, NJ 07601

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Case number (if known) Document Debtor 1 Justin Daniel Miller 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. 1

	□ No. Go to line 11.■ Yes. Fill in the information below.				
	Creditor Name and Address		Describe the Property	Date	Value of the
		Е	Explain what happened		property
	Ford Motor Credit		Vages	Dec 2018 to March 2019	\$800.00
		_	Property was repossessed. Property was foreclosed.	Wal off 2013	
		_	Property was garnished.		
		_	☐ Property was attached, seized or levied.		
11.	accounts or refuse to make a payment b		y, did any creditor, including a bank or financial ins se you owed a debt?	stitution, set off any	amounts from your
	Yes. Fill in the details.				
	Creditor Name and Address		Describe the action the creditor took	Date action was taken	Amount
Par 13.			, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	t			
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or o		, did you give any gifts or contributions with a tota	ıl value of more than	\$600 to any charity?
	Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	uptcy	or since you filed for bankruptcy, did you lose any	hing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and	Desc	cribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Inclu	de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost

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Debtor 1 Justin Daniel Miller

Dos	List Cartain Daymanto or Transfero				
	Within 1 year before you filed for bankruptcy, dic consulted about seeking bankruptcy or preparin Include any attorneys, bankruptcy petition preparers	g a bankruptcy petition?			ty to anyone you
	□ No ■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount o paymen
	Cullen and Dykman LLP 433 Hackensack Avenue, 12th Fl. Hackensack, NJ 07601 dedelberg@cullenanddykman.com Linda Miller, (Justin's Mother)	Attorney Fees		07/28/17 (\$300), 02/22/18 (\$300), 08/29/18 (\$3000)	\$3,600.00
17.	Within 1 year before you filed for bankruptcy, did promised to help you deal with your creditors or Do not include any payment or transfer that you liste	to make payments to your creditors?		r transfer any proper	ty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any proper transferred	ty	Date payment or transfer was made	Amount o paymen
18.	Within 2 years before you filed for bankruptcy, ditransferred in the ordinary course of your busine Include both outright transfers and transfers made a include gifts and transfers that you have already listed.	ess or financial affairs? s security (such as the granting of a sec			
	■ No □ Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and value of property transferred		ny property or received or debts change	Date transfer was made
	Person's relationship to you				
19.	Within 10 years before you filed for bankruptcy, obeneficiary? (These are often called asset-protection No Yes. Fill in the details.	did you transfer any property to a sel on devices.)	f-settled tru	st or similar device o	of which you are a
	Name of trust	Description and value of the proper	ty transferre	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instrum	nents, Safe Deposit Boxes, and Stora	ge Units		
20.	Within 1 year before you filed for bankruptcy, we	re any financial accounts or instrum	ents held in	your name, or for yo	ur benefit, closed,
	sold, moved, or transferred?	er financial accounts: certificates of	denosit: sh:	ares in hanks credit	unions brokerage

houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account number Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer Case 19-17137-SLM Doc 1 Filed 04/08/19 Entered 04/08/19 18:49:17 Desc Main Page 40 of 55 Case number (if known) Document

Debtor 1 Justin Daniel Miller

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, an	y safe deposit box or other deposito	ory for securities,
	■ No □ Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or plant	ace other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust
	□ No ■ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Philip Miller 300 Prospect Avenue Hackensack, NJ 07601	•	2003 Saturn Vehicle	\$750.00
Par	t 10: Give Details About Environmental Informa	ation		
or	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	- ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	aw, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,
₹ер	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Page 41 of 55 Document ase number (if known) Debtor 1 Justin Daniel Miller 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Justin Daniel Miller **Justin Daniel Miller** Signature of Debtor 2 Signature of Debtor 1 Date April 8, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:					
Debtor 1	Justin Daniel Mill				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number					
(if known)				☐ Check if this is an amended filing	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Justin Daniel Miller	Case number (if known)	
name: Descrip	otion of	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. 	☐ Yes
propert securin	-	☐ Retain the property and [explain]:	-
For any ui	rmation below. Do not list real estate	ty Leases you listed in Schedule G: Executory Contracts and Unexpired leases. Unexpired leases are leases that are still in effect; the ty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property lea	ses	Will the lease be assumed?
Lessor's r Description Property:	name: n of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Under per	Sign Below nalty of perjury, I declare that I have in hat is subject to an unexpired lease.	dicated my intention about any property of my estate that sec	cures a debt and any personal
	lustin Daniel Miller	Y	
Jus	tin Daniel Miller ature of Debtor 1	Signature of Debtor 2	
Date	April 8, 2019	Date	

Fill i	n this information to identify your case:		Ch	eck on	e box only as d	irected in this form and	in Form
Deb	tor 1 Justin Daniel Miller		122	2A-1Su	ipp:		
Deb	tor 2						
	use, if filing)		'	■ 1. T	here is no pres	umption of abuse	
Unit	ed States Bankruptcy Court for the: District of New Jers	еу				o determine if a presur	•
O						nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test
(if kno	e number		,	□ 3. TI	he Means Test	does not apply now be	ecause of
						service but it could ap	
				☐ Che	eck if this is a	n amended filing	
Off	ficial Form 122A - 1						
Ch	apter 7 Statement of Your Curi	ent Mor	nthly Inc	omo	е		12/15
	·					a accurate of mare and	o is pooded
ittac	s complete and accurate as possible. If two married people ar h a separate sheet to this form. Include the line number to wh	ich the addition	nal information a	pplies.	On the top of a	ny additional pages, wri	te your name and
	number (if known). If you believe that you are exempted from fying military service, complete and file Statement of Exempt						
Pari	11: Calculate Your Current Monthly Income						
1.	What is your marital and filing status? Check one only						
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill out	both Columns	A and B lines	2-11			
	☐ Married and your spouse is NOT filing with you. Y		·				
	☐ Living in the same household and are not legal	•	•	lumns	A and B lines 2	D-11	
	☐ Living separately or are legally separated. Fill o				,		ı declare under
	penalty of perjury that you and your spouse are le- living apart for reasons that do not include evading	gally separated	d under nonban	kruptcy	/ law that applie	es or that you and your	
	ill in the average monthly income that you received from all s						
th	01(10A). For example, if you are filing on September 15, the 6-mo ie 6 months, add the income for all 6 months and divide the total b	y 6. Fill in the res	sult. Do not includ	de any ir	ncome amount m	ore than once. For examp	le, if both
s	pouses own the same rental property, put the income from that pro-	perty in one colu	umn only. If you h				ace.
				Colum Debto		Column B Debtor 2 or	
						non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a	nd commissio	ons (before all	\$	2,607.06	\$	
3.	payroll deductions). Alimony and maintenance payments. Do not include p	avments from	a spouse if	–		<u> </u>	
0.	Column B is filled in.	aymonto nom	a opouco ii	\$	0.00	\$	
4.	All amounts from any source which are regularly pai of you or your dependents, including child support.						
	from an unmarried partner, members of your household,						
	and roommates. Include regular contributions from a spot filled in. Do not include payments you listed on line 3.	use only if Col	lumn B is not	\$	0.00	\$	
5.		r farm		·—		<u> </u>	
	, s		otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$0.00					
	Net monthly income from a business, profession, or farm	. \$0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Dal	ton 4				
			otor 1				
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00					
	Ordinary and necessary operating expenses Net monthly income from rental or other real property	*	Copy here ->	\$	0.00	\$	
7		Ψ		\$	0.00	\$	
1.	Interest, dividends, and royalties			Ψ			

Official Form 122A-1

_										
tor 1 Just	in Daniel Miller				Case num	ber (<i>if known</i>)				
					Column / Debtor 1		Columi Debtor non-fil	2 or		
Unemplo	ment compensation				\$	0.00	\$			_
	er the amount if you contend that th Security Act. Instead, list it here:	e amount received	was a benefit	t under						
For you	r spouse	\$	0.0	00						
For you	r spouse	\$								
	or retirement income. Do not included the Social Security Act.	de any amount rece	eived that was	за	\$	0.00	\$			-
Do not inc received a	om all other sources not listed ab lude any benefits received under the is a victim of a war crime, a crime ag errorism. If necessary, list other sou v.	e Social Security Acgainst humanity, or	ct or payment international	is or	•					
• —					\$	0.00	\$			-
_					\$	0.00	\$			_
Т	otal amounts from separate pages,	if any.		+	\$	0.00	\$			-
Calculate										
	your total current monthly incom nn. Then add the total for Column A	to the total for Col		\$	2,607.06	+ \$ _			Tota	current monthl
t 2: Det	termine Whether the Means Test A	Applies to You the year. Follow th	nese steps:				here=>		Tota	me
t 2: Det	nn. Then add the total for Column A	Applies to You the year. Follow th	nese steps:				here=>		Tota	current monthly
. Calculate	termine Whether the Means Test A	Applies to You the year. Follow the	nese steps:				here=>		Tota inco	current monthly
t 2: Det	nn. Then add the total for Column A termine Whether the Means Test A your current monthly income for your total current monthly income for	Applies to You the year. Follow the rom line 11	nese steps:				here=>	12b.	Tota inco	current monthly me
2: Det Calculate 12a. Copy Multip 12b. The r	termine Whether the Means Test A your current monthly income for your total current monthly income for by by 12 (the number of months in a	Applies to You the year. Follow the rom line 11 a year) part of the form	nese steps:				here=>		Tota inco	2,607.06
Det Calculate 12a. Copy Multip 12b. The r	your current monthly income for your total current monthly income for by 12 (the number of months in a result is your annual income for this	Applies to You the year. Follow the rom line 11 a year) part of the form oplies to you. Follo	nese steps:				here=>		Tota inco	2,607.06
Calculate 12a. Copy Multip 12b. The r Calculate Fill in the s	your current monthly income for your total current monthly income for by 12 (the number of months in a result is your annual income for the median family income that ap	Applies to You the year. Follow the rom line 11 a year) part of the form poplies to you. Follo	nese steps:				here=>		Tota inco	2,607.06
Det Calculate 12a. Copy Multip 12b. The r Calculate Fill in the r To find a li	your current monthly income for your total current monthly income for by 12 (the number of months in a result is your annual income for the median family income that appetate in which you live.	Applies to You the year. Follow the rom line 11 a year) part of the form oplies to you. Follo and size of househounts, go online usi	ow these steps The steps of the step of	s:	Co	py line 11			Tota inco	2,607.06
Calculate 12a. Copy Multip 12b. The r Calculate Fill in the r Fill in the r To find a lift for this for	your current monthly income for your total current monthly income for by by 12 (the number of months in a result is your annual income for this pattern in which you live. The median family income that appetite in which you live. The median family income for your state is to fapplicable median income amount income and the median family income for your state is to fapplicable median income amount income income amount i	Applies to You the year. Follow the rom line 11 a year) part of the form oplies to you. Follo and size of househounts, go online usi	ow these steps The steps of the step of	s:	Co	py line 11		12b.	\$	2,607.06 12 31,284.72
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X /s/ Justin Daniel Miller

Justin Daniel Miller

Signature of Debtor 1

Date April 8, 2019

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Document Justin Daniel Miller

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2018 to 03/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Whole Foods MArket

Income by Month:

Debtor 1

6 Months Ago:	10/2018	\$2,607.06
5 Months Ago:	11/2018	\$2,607.06
4 Months Ago:	12/2018	\$2,607.06
3 Months Ago:	01/2019	\$2,607.06
2 Months Ago:	02/2019	\$2,607.06
Last Month:	03/2019	\$2,607.06
	Average per month:	\$2,607.06

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
(\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
,	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-17137-SLM Doc 1 Filed 04/08/19 Entered 04/08/19 18:49:17 Desc Main

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtDistrict of New Jersey

In re	Justin Daniel Miller		Case No.						
		Debtor(s)	Chapter	7					
	DISCLOSURE OF COM	PENSATION OF ATTO	RNEY FOR DI	EBTOR(S)					
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplar	filing of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered	or to				
	For legal services, I have agreed to accept		\$	3,600.00					
	Prior to the filing of this statement I have recei			3,600.00					
				0.00					
2.	The source of the compensation paid to me was:								
	☐ Debtor ☐ Other (specify): Li	nda Miller, mother							
3.	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
4.	■ I have not agreed to share the above-disclosed of	compensation with any other person	unless they are mem	bers and associates of my la	w firm.				
	☐ I have agreed to share the above-disclosed component, together with a list of the				ı. A				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	 a. Analysis of the debtor's financial situation, and in b. Preparation and filing of any petition, schedules c. Representation of the debtor at the meeting of condition d. [Other provisions as needed] All the usual incidents of a Chapter 	, statement of affairs and plan which reditors and confirmation hearing, a	h may be required;						
6.	By agreement with the debtor(s), the above-disclose Representation of the debtors in any any other adversary proceeding, res uncontested filling, extensions of til	y dischargeability actions, jud sponding to information or dis	icial lien avoidanc						
		CERTIFICATION							
	I certify that the foregoing is a complete statement obankruptcy proceeding.	of any agreement or arrangement fo	r payment to me for r	epresentation of the debtor(s) in				
Δ	April 8, 2019	/s/ David Edelbe	rg						
Date		David Edelberg							
		Signature of Attorn Cullen and Dykn							
		433 Hackensack	Avenue, 12th Fl.						
		Hackensack, NJ 201-488-1300 Fa							
			ax: 201-466-6541 enanddykman.com	ı					

Name of law firm

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United States Bankruptcy Court District of New Jersey

		District of New Jersey		
In re Ju	ustin Daniel Miller		Case No.	
		Debtor(s)	Chapter	7
	VERI	IFICATION OF CREDITOR M	ATRIX	
The above-	named Debtor hereby verifies t	that the attached list of creditors is true and corr	rect to the best	of his/her knowledge.
Date: Ap	oril 8, 2019	/s/ Justin Daniel Miller		
		lustin Daniel Miller		

Signature of Debtor

AES/Paid in Full PO BOX 2251 Harrisburg, PA 17105-2251

Allied Account Services 422 Bedford Ave Bellmore, NY 11710-3584

American Education Services P.O. Box 2461 Harrisburg, PA 17130

AmeriHealth New Jersey PPO 259 Prospect Plains Rd Cranbury, NJ 08512

Arstrat 9800 Centre Parkway Suite 1100 Houston, TX 77036

Celentano, Stadtmauer and Walentowicz LL Northview Office Park 1035 RT46E Suite B208 Clifton, NJ 07015

Certified Credit and Collection Bureau P.O. Box 1750 Whitehouse Station, NJ 08889

Convergent Outsourcing Inc P.O. Box 9004 Renton, WA 98057

Credit Collection Services Two Wells Avenue Newton Center, MA 02459

Fairleigh Dickinson University 1000 River Rd Teaneck, NJ 07666

Ford Motor Credit P.O. Box 390910 Minneapolis, MN 55439 GB Collects LLC 1253 Haddonfield Berlin Rd Voorhees, NJ 08043

Great Lakes P.O.Box 7860 Madison, WI 53707-7860

Hackensack University Medical Center P.O. Box 48027 Newark, NJ 07101

HMC Cardiac Diagnostic Service 30 Prospect Ave Hackensack, NJ 07601

Michael Harrison Atttorney at Law 3155 State Route 10 Suite 214 Denville, NJ 07834

Morgan, Bornstein, Morgan 1236 Brace Road Suite K Cherry Hill, NJ 08034

Neurologic Specialties, LLC 211 Essex Street Suite 205 Hackensack, NJ 07601

Pennsylvania Higher Education Assistance 1200 North Seventh Street Harrisburg, PA 17102-1444

Philip Miller 20 Hedgewood Road Howell, NJ 07731

Progressive Insurance Company 2 Wells Ave Newton, MA 02459

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Riverside Pediatric Group 38 Meadowlands Pkwy Suite 205 Secaucus, NJ 07094

Superior Court of New Jersey Special Civil Part, Law Divison 10 Main Street Hackensack, NJ 07601

Valley Physicians Services PC P.o. Box 19000 Bellfast, ME 04915

Verizon Wireless One Verizon way Basking Ridge, NJ 07920